# **CLAIM FOR THE GENERAL AVIATION** PETROLEUM INSPECTION FEE ALLOWANCE

(claim covers gallons in excess of 1 million purchased in Wisconsin during a calendar month)

Mail your claim plus invoices to: Wisconsin Department of Revenue PO Box 8900 Madison, WI 53708-8900 (608) 266-8242

DUE DATE: 12 months from the date fuel is purchased.

**Enter Month & Year** Covered By Claim →

(each refund claim filed is limited to fuel purchased during one calendar month)

1. Name of Individual, Partnership or Corporation  2. Federal Employer ID No. (FEIN) AND/OR Social Security No. (if you as proprietor)  3. Business Name  Telephone Number  Wis. County of Business I.  4. Mailing Address - Street or PO Box  City  State  Zip Cod  5. Type of Organization (check one) Indicate Date Incorporated:  1. Individual 2. Partnership 3. Wisconsin corporation 2. Partnership 4. Out-of-state corporation 9. If yes, please explain:  COMPUTATION OF GENERAL AVIATION ALLOWANCE 7. Purchases of General Aviation Fuel During the Month covered by This Claim (itemize your purchases on the lines below, attact tional sheets if necessary)  Name of Supplier  Type of Fuel  Date Purchased  Invoice Number  Gallons Purchase (enter whole gallons on the lines below)  Gallons Purchase (enter whole gallons on the lines below)  Computation of Supplier  Type of Fuel  Date Purchased  Invoice Number  Gallons Purchase (enter whole gallons on the lines below)	Location de			
4. Mailing Address - Street or PO Box  City  State  Zip Cod  5. Type of Organization (check one)  Indicate Date Incorporated:  1. Individual 3. Wisconsin corporation 2. Partnership 4. Out-of-state corporation 6. Do you sell to, trade or exchange general aviation fuel with any person or company other than your own (including all its various locations)? Yes No If yes, please explain:  COMPUTATION OF GENERAL AVIATION ALLOWANCE 7. Purchases of General Aviation Fuel During the Month covered by This Claim (itemize your purchases on the lines below, attact tional sheets if necessary)  Name of Supplier  Type of Fuel  Date Purchased  Invoice Number  Gallons Purchase (enter whole gallons on the lines below)  Gallons Purchase (enter whole gallons on the lines below)	us			
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2. Partnership 4. Out-of-state corporation	us			
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a. b.	7. Purchases of General Aviation Fuel During the Month covered by This Claim (itemize your purchases on the lines below, attach additional sheets if necessary)			
b.				
c				
d.				
e.				
f.				
g.				
h.				
i.				
8. TOTAL GALLONS PURCHASED DURING THE MONTH (add gallons on line 7)				
9. <b>LESS: purchase requirement</b> (only general aviation fuel purchased in excess of one million gallons during a month qualifies for this allowance)				
10. GENERAL AVIATION FUEL GALLONS QUALIFYING FOR THE PETEROLEUM INSPECTION FEE ALLOWANCE (line 8 less line 9)				
11. ALLOWANCE FACTOR (2 <sup>¢</sup> per gallon)				
12. TOTAL ALLOWANCE (multiply gallons on line 10 by allowance factor on line 11)				

**DECLARATION:** I declare under penalties of law that the above information is true, correct and complete to the best of my knowledge and belief.

Signature (do not print or type)	Date	Business Telephone No.
		( )

## **INSTRUCTIONS**

## WHO MAY FILE THIS CLAIM

This form may be filed by anyone who purchases general aviation fuel in Wisconsin from suppliers in excess of one million gallons during a calendar month. The term "supplier" is defined in ss. 168.01(2) and 78.005(14) of the Wisconsin Statutes. This allowance was created by the Wisconsin State Budget, 1997 Wis. Act 27.

The allowance applies to general aviation fuel purchased in Wisconsin by air carriers on and after October 14, 1997. THE ALLOWANCE MAY NOT BE CLAIMED IF YOU PURCHASE GENERAL AVIATION FUEL FOR RESALE. The allowance of 2 ¢ per gallon is calculated on the gallons purchased during a month that exceed the one million gallon purchase requirement. The allowance is paid from the petroleum inspection fees (2¢ per gallon effective for months after 4-1-06) collected by the department.

#### **INVOICES**

You must attach to each refund claim copies of invoices verifying the fuel purchases itemized on line 7. The copies will not be returned to you. They will become a permanent part of your refund claim.

## **DUE DATE OF REFUND CLAIM**

Your refund claim must be filed within 12 months of the date the general aviation fuel is purchased.

#### ADDITIONAL FORMS AND ASSISTANCE

Information, forms and assistance are available at our following office:

2135 Rimrock Road Madison, Wisconsin Phone: (608) 266-3223 or 266-8242

or write to:

Excise Tax Section PO Box 8900 Madison, WI 53708-8900

#### **PENALTIES**

Wisconsin law imposes various penalties and interest when an inaccurate refund claim is negligently filed or a fraudulent claim is filed. Persons who knowingly sign or assist in the preparation of a fraudulent claim may be fined not more than \$500 or imprisoned not more than 30 days or both. Altering a purchase date on an invoice to bring it within the 12 month time limitation or filing a refund claim is a fraudulent act.